P02000122514

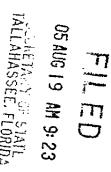
(Red	questor's Name)			
(Add	dress)			
	dress)			
(Add	1(655)			
(City	//State/Zip/Phone	e #)		
		<u></u>		
PICK-UP	WAIT	MAIL		
(Bus	siness Entity Nar	me)		
(Du	sinosa Endry Mai	116)		
(Do	cument Number)			
Certified Copies Certificates of Status				
Γ		 1		
Special Instructions to I	Filing Officer:	1		
		1		
		ĺ		
		ì		
		ļ		
<u> </u>				





200058627902

08/19/05--01012--023 **35.00



gr RA

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Info Imaging Solutions, Inc.	
(Name of corporation)	
DOCUMENT NUMBER: P02000122514	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.	** *** ***** ***
Please return all correspondence concerning this matter to the following:	 .
Paula S. O'Neil	
(Name of contact person)	_ ·= · · · · · · · · · · · · · · ·
Info Imaging Solutions, Inc. (Firm/Company)	. See,
8231 Danbury Lane (Address)	·- &";
Bayonet Point, FL 34667	
(City/state and zip code) For further information concerning this matter, please call:	in the second of
Paula S. O'Neil at (727) 8625598	
(Name of contact person) (Area code & daytime telephone number)	
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399	

CR2E045(6/04)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida State organized under the laws of the State of Flori egistered agent, or both, in the State of Flori	ida		
1. The name of	the corporation: Info Imaging Solution	ons, Inc.			
2. The principal	office address: 8231 Danbury Lane int, FL 34667			, <u>u</u>	
3. The mailing a	address (if different):				
4. Date of incor	poration/qualification: 11/22/2002	Document number: P020001225	514		
	d street address of the current registe rtment of State:	red agent and registered office on file with the	te		
	Paula S. O'Neil		AL S	S	
	13304 Wagner Drive		HAH		-77
	Bayonet Point, FL 34667 US	-	ASSE ASSE	9	1
6. The name and (if changed):	d street address of the new registered	l agent (if changed) and /or registered office	FL0	AH 9: 23	Ü
	Paula S. O'Neil		DE A	w	
	8231 Danbury Lane				
	(P.O. Box NOT acce Bayonet Point, FL 34667	eptable)			
	ess of its registered office and the s	street address of the business office of its re lopted by its board of directors or by an office notified in writing of the change.		agent.	,
authorized by t	he board, or the corporation has be	en notified in writing of the change.			
Paula S. O'Neil (Printed or typed name and title)					
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered age to comply with the provisions of al nd I am familiar with and accept th ing filed merely to reflect a change s been notified in writing of this ch	nt and agree to act in this capacity. I statutes relative to the proper and comple e obligation of my position as registered as in the registered office address, I hereby c ange.	te perfori zent. Or, onfirm th	manc if thi at the	re is e
Paul	gnature of Registered Agent)	08/15/2005 (Date)			
If signing on be	chalf of an entity:	····			
Info Imaging So					
ľ	Typed or Printed Name)				

* * * FILING FEE: \$35.00 * * *